

## ISSUE SLIP STYLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	PS	66621	7/20
O.I.P.E. CLASSIFIER		25	07-22-99
FORMALITY REVIEW	ERW BCC	70622 30163	8-2-99 9-8-99

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
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Claim	Date
Final	
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If more than 150 claims or 10 actions  
staple additional sheet here

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